



# Lee County Environmental Health

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DATE: \_\_\_\_\_

OSTDS Permit No.: \_\_\_\_\_

APPLICANT: \_\_\_\_\_

LOCATION ADDRESS: \_\_\_\_\_

CONTRACTOR: \_\_\_\_\_

LICENSE NO: \_\_\_\_\_

QUALIFIER: \_\_\_\_\_

FILL SOURCE: \_\_\_\_\_

I, \_\_\_\_\_, have been contracted to install an onsite wastewater treatment and disposal system at the address referenced above. I certify that all work was conducted by me or by persons employed by me under my direct supervision.

\_\_\_\_\_  
Signature of licensed septic tank contractor/plumber

Printed Name: \_\_\_\_\_

Complete Address: \_\_\_\_\_

\_\_\_\_\_  
Telephone Number: \_\_\_\_\_ FAX Number: \_\_\_\_\_